

**YOUTH SERVICES
EMPLOYEE GRIEVANCE FORM**

Grievant's Name: _____ Unit/Section: _____

Date Grieved Event Occurred: _____ Date Grievance Filed: _____

STEP ONE

Grievance Statement: (check one) ☐ written below OR ☐ see attachment

Relief Sought: (check one) ☐ written below OR ☐ see attachment

Grievant's signature: _____ Date: _____

c: **Public Safety Services Human Resources
OJJ Legal Services
Regional Director or Assistant Secretary/designee**

STEP ONE RESPONSE

Given by: _____ Job Title: _____

Response is: (check one) ☐ written below OR ☐ see attachment

Signature: _____ Date: _____

Employee response:

___ I am satisfied with the answer to my grievance.

___ I am not satisfied with the answer to my grievance and I wish to have it referred to the Second Step.

Grievant's Signature: _____ Date: _____

**c: Public Safety Services Human Resources Office
OJJ Legal Services
Regional Director or Assistant Secretary/designee**

(A written response is to be given to employee within seven (7) calendar days following the receipt of the STEP ONE)

STEP TWO

Step Two Response:

Given by: _____ Job Title: _____

Response is: (check one) ☐ written below OR ☐ see attachment

_____ Date: _____
Regional Director or Assistant Secretary/designee signature:

Employee response:

___ I am satisfied with the answer to my grievance.

___ I am not satisfied with the answer to my grievance and I wish to have it referred to the Third Step.

Grievant's signature: _____ Date: _____

**c: Public Safety Services Human Resources Office
OJJ Legal Services
Regional Director or Assistant Secretary/designee**

(A written response is to be given to employee within 14 calendar days after receipt of the STEP TWO.)

STEP THREE

Decision of appointing authority or designee:

Response is: (check one) ☐ written below OR ☐ see attachment

Deputy Secretary/ designee: _____ Date: _____

c: **Public Safety Services Human Resources Office**
OJJ Legal Services
Regional Director or Assistant Secretary/designee

(A written response is to be given to employee within 21 calendar days after receipt of the STEP THREE)